

10/024 771

TELEFAX COVER SHEET

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THIS MESSAGE HAS 10 PAGES INCLUDING THIS SHEETTO: Commissioner For PatentsFAX NO.: 703-872-9318FROM: John M. KellyDATE: August 5, 2003MATTER: Our Ref.: NAP/NL000726

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The following has been received in the U.S. Patent and Trademark Office on the date stamped hereupon:

<input type="checkbox"/> Specification (<u> </u> pages)	<input type="checkbox"/> Priority Document
<input type="checkbox"/> Claims (<u> </u> pages)	<input checked="" type="checkbox"/> Transmittal Letter (2 copies)
<input type="checkbox"/> Abstract (1 page)	<input type="checkbox"/> Deposit Acct. Transaction
<input type="checkbox"/> Oath or Declaration	<input type="checkbox"/> Assignment & Cover Sheet
<input type="checkbox"/> Petition	<input type="checkbox"/> Drawings (<u> </u> sheets) FORMAL
<input type="checkbox"/> Power of Attorney	<input type="checkbox"/> Drawings (<u> </u> sheets) informal
<input type="checkbox"/> Claim of Priority	<input type="checkbox"/> Check No. <u> </u> for \$ <u> </u>
<input type="checkbox"/> <u> </u> Mail Certificate,	<input type="checkbox"/> Disclosure Statement & PTO-1449
<input type="checkbox"/> dated <u> </u>	<input checked="" type="checkbox"/> <u>37 CFR 1.111 Response</u>

This application has been assigned serial number 10/024 771.

CERTIFICATE of FACSIMILE TRANSMISSION					PATENT APPLICATION		
I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office; FAX No. <u>703-872-9318</u> on <u>August 5, 2003</u>					Attorney Docket No. NL 000726		
Signature: Name: <u>Alberta Gamble</u>							
AMENDMENT TRANSMITTAL LETTER							
In re application of: <u>Jozef Cornelis Walterus Van Vroonhoven</u>							
Application Number 10/024,771		Filing Date 12/20/01		Examiner Kevin J. Quarterman		Group Art Unit 2879	
Title: <u>CATHODE RAY TUBE WITH MODIFIED IN-LINE ELECTRON GUN</u>							
TO THE COMMISSIONER FOR PATENTS: Transmitted herewith is an amendment in the above-identified application. The fee has been calculated as shown below.							
CLAIMS AS AMENDED							
(1)	(2) Claims Remaining after Amend.	(3)	(4) Highest No. Previously Paid For	(5) No. of Extra Claims	(6) Rate	(7) Additional Fee	
Total Claims	16	Minus	20 =	0	x \$ 18	\$ 0.00	
Independent Claims	2	Minus	3 =	0	x \$ 84	\$ 0.00	
Multiple Dependent Claims	0	Minus	0 =	0	x \$ 280	\$ 0.00	
Total Additional Fee for this Amendment						\$ 0.00	
<input checked="" type="checkbox"/>		No additional fee is required.					
<input type="checkbox"/>		Charge \$ 0.00 to Deposit Account No. An additional copy of this sheet is enclosed.					
<input type="checkbox"/>		Reference Accompanying Amendment for Overpayment, Underpayment and Extension of Time Instructions.					
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<input checked="" type="checkbox"/>		Additional papers enclosed: FAX COVER SHEET					
<u>John M. Kelly</u> John M. Kelly Registration No. 33,920				August 5, 2003 Date of Signature Telephone No. 732-530-9404			

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